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## \*\* CONTINUING DATA \*\*\*\*\*

*None JZ*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*None JZ*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	VT	4	20	3
Verified and Acknowledged	Examiner's Signature <i>JZ</i>	Initials			

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## TITLE

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